

JUL 20 2006



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From: David E. HeiseyRe: Application No. 10/516,822 – Revocation/Power of AttorneySender's Name: Pridge McDougall

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1. Transmittal (1 pg.); and
2. Revocation of Power of Attorney with New Power of Attorney and
Change of Correspondence Address (1 pg.)

First Named Inventor: Robert Gilmour
Title: BODY JOINT LINER
Application No.: 10/516,822
Examiner: Unknown
Our Docket No.: 07EW-116677
Client: OMNI life science, Inc.
Atty/Sec.: Heisey/McDougall

Filing Date: October 5, 2005
Group Art Unit: 3743
Date Faxed: 07/20/06
Date Due: N/A

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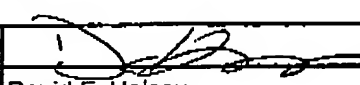
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/516,822	
	Filing Date	October 5, 2005	
	First Named Inventor	Robert Gilmour	
	Art Unit	3743	
	Examiner Name	TBA	
Total Number of Pages in This Submission	2	Attorney Docket Number	07EW-116677 (formerly 4502-1062)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Sheppard, Mullin, Richter & Hampton, LLP	
Signature		
Printed name	David E. Helsey	
Date	July 20, 2006	Reg. No. 42,651

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/516,822
	Filing Date	October 5, 2005
	First Named Inventor	Robert Gilmour
	Art Unit	3743
	Examiner Name	TBA
	Attorney Docket Number	07EW-116677 (formerly 4502-1062)

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

30764

☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

30764


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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Robert Gilmour		
Date	July 18, 2006	Telephone	464 9 3370566

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